Demographics

Our Community

<table>
<thead>
<tr>
<th>Total Population</th>
<th>2,096,123</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Population, African American</td>
<td>183,262</td>
</tr>
<tr>
<td>Total Population, American Indian/Alaskan Natives</td>
<td>9,706</td>
</tr>
<tr>
<td>Total Population, Asian/Pacific Islander</td>
<td>137,788</td>
</tr>
<tr>
<td>Total Population, Hispanic</td>
<td>1,060,475</td>
</tr>
<tr>
<td>Total Population, White</td>
<td>704,893</td>
</tr>
<tr>
<td>Total Live Births</td>
<td>30,201</td>
</tr>
</tbody>
</table>

Our Mothers and Babies

% of women delivering a baby who received prenatal care beginning in the first trimester of their pregnancy .......................... 83.4%
% of births covered by Medi-Cal ................................................................................................................................................. 52.7%
% of women ages 18-64 without health insurance ......................................................................................................................... 24.7%
% of women giving birth to a second child within 24 months of a previous pregnancy ................................................................. 39.2%
% live births less than 37 weeks’ gestation ................................................................................................................................. 8.9%
Gestational diabetes per 1,000 females age 15-44 .......................................................................................................................... 8.0%
% of female population 18-64 living in poverty (0-200% FPL) ........................................................................................................... 40.4%
Substance use diagnosis per 1,000 hospitalizations of pregnant women* .......................................................................................... 19.8
Unemployment Rate ........................................................................................................................................................................... 11.3%

Our Children and Teens

Teen Birth Rate per 1,000 births (ages 15-19) ........................................................................................................................................... 32.4
Motor vehicle injury hospitalizations per 100,000 children age 0-146 .......................................................................................................... 14.7
% of children, ages 0-18 years living in poverty (0-200% FPL) ........................................................................................................... 53.1%
Mental health hospitalizations per 100,000 age 15-24* .......................................................................................................................... 1,689.7
Children in Foster Care per 1,000 children 5 ................................................................................................................................... 7.7
Substance abuse hospitalization per 100,000 aged 15-24* ..................................................................................................................... 1,008.3

Data sources: 1 CA Dept. of Finance population estimates for Year 2015, January 2013; 2 CA Birth Statistical Master Files 2011-2013 Annual Average, 3 year average; 3 California Health Interview Survey, 2014; 4 State of California, Employment Development Department, February 2017; 5 Data from CA Child Welfare Indicators Project, UC Berkeley Point in Time Jul 2015; 6 California Department of Public Health, Safe and Active Communities Branch; *Data carried over from the Community Profile 2015-2016.

About Our Community – Health Starts Where We Live, Learn, Work, and Play

With an area of over 20,000 square miles, the County of San Bernardino is the largest county in the contiguous United States. The county is comprised of several distinct regions, including a wide strip of urban development (residential and commercial) along the Interstate 10 corridor, especially in its westernmost section; mountains and lakes; and vast desert expanses in the northern and eastern quadrants. The size of the county, distances between regions, and the physical/topographical features all contribute significantly to the challenge of providing services to residents. Many of the cities in the rapidly growing high desert region are greater than 40 miles from the county seat, San Bernardino, which is the largest city and the central location for most of the jurisdiction’s health and community services personnel. The size of the county similarly impacts access to infrastructure, especially public transportation, which is one of the indicated barriers to the county’s most in need populations. There are 37 incorporated cities/towns and unincorporated communities in the county.
Major Industries and Employers (public/private)

The major industries in the County are: trade/transportation/utilities, government, education and health, professional and business services, leisure and hospitality, manufacturing, construction, and financial services. The top ten employers in the County are the County of San Bernardino, Stater Bros. Markets, U.S. Army, Loma Linda University, U.S. Marine Corps, United Parcel Service, San Bernardino City Unified School District, Ontario International Airport, Loma Linda University Medical Center, and Kaiser Permanente (Fontana).

Walkability, Recreational Areas

- Approximately 2.5 million acres of recreational land and more than 470 bikeway miles throughout the County
- There are more than 30 wilderness areas within the County (in whole or part)
- National protected areas of note include: Angeles National Forest, Death Valley National Park, Havasu National Wildlife Refuge, Joshua Tree National Park, Mojave National Preserve, and San Bernardino National Forest
- Six (6) ski resorts: Bear Mountain, Lake Arrowhead, Mountain High, Mt. Baldy, Snow Summit, and Snow Valley Mountain Resort
- Eleven (11) regional parks and recreation areas, including Calico Ghost Town, Santa Ana River Trail, and Lake Gregory
- Ten (10) community theaters and/or concert venues, and eight (8) museums and/or historical societies

Health System – Health and Human Services for the MCAH Population

Healthy Babies are Worth the Wait

Healthy Babies are Worth the Wait (HBWW) is a March of Dimes-led, community program aimed at reducing preterm birth. The program convenes the key perinatal stakeholders in a selected community to identify where improvements might be made in areas that impact preterm birth. Model programs have been implemented in Kentucky and Texas, and San Bernardino County (High Desert region) was selected for implementation of this model. The local MCAH Program is an active member of the HBWW steering committee and workgroups. HBWW have identified three major risk factors to address: 1) tobacco and substance use, 2) access to services/remote communities, and 3) birth spacing and access to family planning services.

Community Vital Signs

Community Vital Signs (CVS) is a community-driven enterprise in partnership with multiple departments within the County to establish and promote a health improvement framework. It is intended to develop evidence-based goals and priorities to align with national and statewide efforts through Healthy People 2020 and Healthy California 2020. CVS focuses on several components of community health and wellness, including access to care, prenatal care, leading causes of death for infants and children under five-years-old, obesity, and chronic disease in children and adults.

Health Status and Disparities for the MCAH Population

Many factors contribute to the existence of health disparities among San Bernardino County’s population, including (but not limited to) widely varying socio-demographics, economic characteristics, and geographic features across the county’s 2.1 million residents and 20,105 square miles. San Bernardino County is ethnically and culturally diverse, with Hispanics comprising the majority of the population (52%), Whites accounting for 30%, and Black and Asian residents accounting for eight and seven percent, respectively. Almost 21% of the county’s population lives below the federal poverty level, and median income is 16% less than it is in California. Like income, educational attainment is lower in the county than in the state, with just 19% of the county’s population age 25 years and older having a bachelor’s degree compared to 32% in California.

Disparities exist for a variety of common MCAH indicators, both between San Bernardino County and California, and between different segments of the population within the county. The infant mortality rate (IMR) was 6.5 infant deaths per 1,000 live
births in San Bernardino County from 2012-2014 (41% higher than California’s rate of 4.6), and ranged from 14.0 among Blacks, to 5.9 among Whites, to 4.6 among Asian/Pacific Islanders. IMR was higher in the High Desert among all racial/ethnic groups, at 12.8 among Blacks, 6.5 among Whites, and 3.9 among Asian/Pacific Islanders. The rate of low birthweight was also higher in the High Desert (7.9%) than it was in the county overall (7.3%) and California (6.8%), and was higher among Black residents in all locations (14% in the High Desert, 12.8% in the county overall, and 11.8% in California). The rate of prematurity (births at less than 37 weeks gestation) was 8.9% in San Bernardino County from 2011-2013, and varied by race/ethnicity (9.5% among Asian/Pacific Islanders, 12.8% among Blacks, 8.3% among Hispanics, and 8.4% among Whites). Prematurity rates were higher in the High Desert among all racial/ethnic groups (13% among Asian/Pacific Islanders, 13.9% among Blacks, 8.7% among Hispanics, and 9% among Whites). The rate of tobacco use during pregnancy was higher in San Bernardino County (3.5%) than it was in California (2%) from 2011-2013, and varied widely by race/ethnicity (1% among Asian/Pacific Islanders, 6% among Blacks, 1.4% among Hispanics, and 8.1% among Whites). The teen birth rate (percentage of births among teens less than 18 years of age) was also higher in San Bernardino County (2.3%) than it was in California (1.8%) in 2013, and ranged from 3.2% among Blacks to 1% among Whites.

Improvement in some of the above-referenced indicators has been realized in the county over time. The IMR decreased by 4% in San Bernardino County from 2009-2011 (6.39) to 2011-2013 (6.13), representing a slightly larger decrease than California’s during the same time (3.2% decline, from 4.81 to 4.66). San Bernardino County’s rate of smoking during pregnancy also decreased over this time for all races/ethnicities, from 3.87% in 2009-2011 to 3.54% in 2011-2013, but most significantly among Blacks (6.54% to 5.93%) and Asian/Pacific Islanders (1.25% to 0.95%). Teen birth rates declined in San Bernardino County at the same rate they declined in California from 2009 to 2013 (40% decline), from 3.8% to 2.3%. The decline in teen birth rates was observed across all racial/ethnic groups in the county (5.2% to 3.2% among Blacks, 4.6% to 2.9% among Hispanics, and 1.8% to 1% among Whites). The prematurity rate declined in San Bernardino County (9.3% to 8.9%) and California (8.8% to 8.4%) from 2009 to 2013, as it did in the High Desert (9.9% to 9.6%), although the rate of decline was slowest in the High Desert. In mid-2015, the Healthy Babies are Worth the Wait program, a community collaborative effort spearheaded by the March of Dimes intended to reduce preterm birth, was implemented in the High Desert; San Bernardino County is an active participant in this effort.